

ANONYMOUS

Witness Name **GRO-B**

Statement No.: WITN2151002

Exhibits: WITN2151003-020

Dated: 21st July 2021

INFECTED BLOOD INQUIRY

EXHIBIT WITN2151009

ANONYMOUS

Use Ball Pen Only Tick appropriate Green Blocks Do Not Bend Form	
Date Collected 3/8/85	
Time Collected 3 PM	
FOR NORMAL VALUES - SEE POCKET CARD	
DATE CODE 16	LAB. No. 11
Clinical Details	
IF PRIVATE PATIENT TICK <input type="checkbox"/>	
GRO-B	
VWD	
MCV fl	
MCH pg	
MCHC g/dl	
Film Report (FOR LAB. USE ONLY)	
Platelets: spec normal	
+ 20% distorted & comment	
Film appears within normal limits	
GRO-C	
ADDRESSOGRAPH LABEL OR	
GRO-B	GRO-B
GRO-B	GRO-B
DOCTOR REQUESTING EXAM REPORT TO BE RETURNED TO	
CM	Hem.

Use Ball Pen Only Tick appropriate Green Blocks Do Not Bend Form	
Date Collected 14/15/85	
Time Collected 3 PM	
FOR NORMAL VALUES - SEE POCKET CARD	
DATE CODE 135	LAB. No. 217
Clinical Details	
IF PRIVATE PATIENT TICK <input type="checkbox"/>	
VWD	
High Risk	
MCV fl	
MCH pg	
MCHC g/dl	
Film Report (FOR LAB. USE ONLY)	
Platelets: spec normal	
+ 20% distorted & comment	
Film appears within normal limits	
GRO-C	
ADDRESSOGRAPH LABEL OR	
GRO-B	GRO-B
GRO-B	GRO-B
DOCTOR REQUESTING EXAM REPORT TO BE RETURNED TO	
GRO-C	Hem.

ANONYMOUS

[illegible]